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INAUGURAL ONE HEALTH CONFERENCE

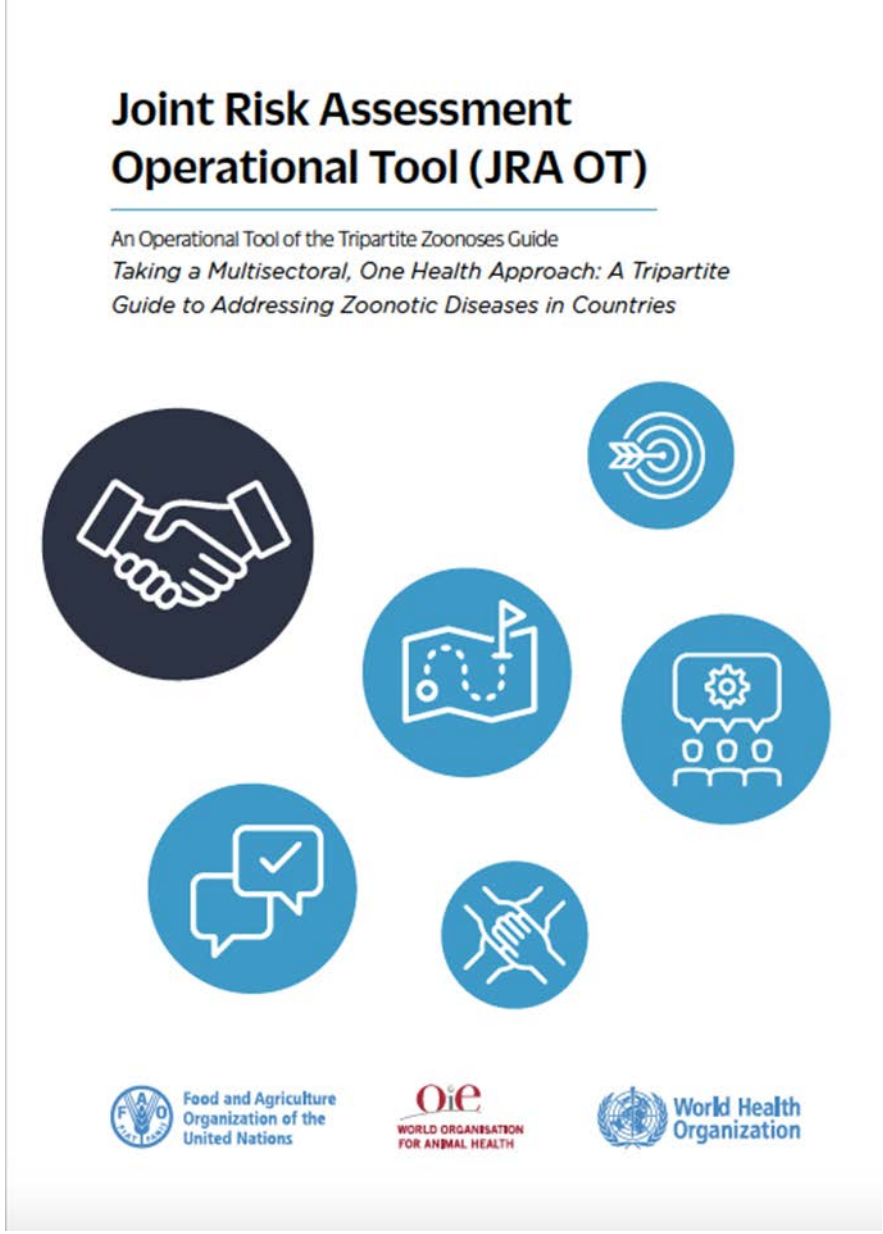
1 - 3 November 2021

Joint Risk Assessment (JRA) Operational Tool and lessons learned on its implementation

Sophie von Dobschuetz

Global Surveillance Coordinator

Food and Agriculture Organization of the United Nations (FAO)



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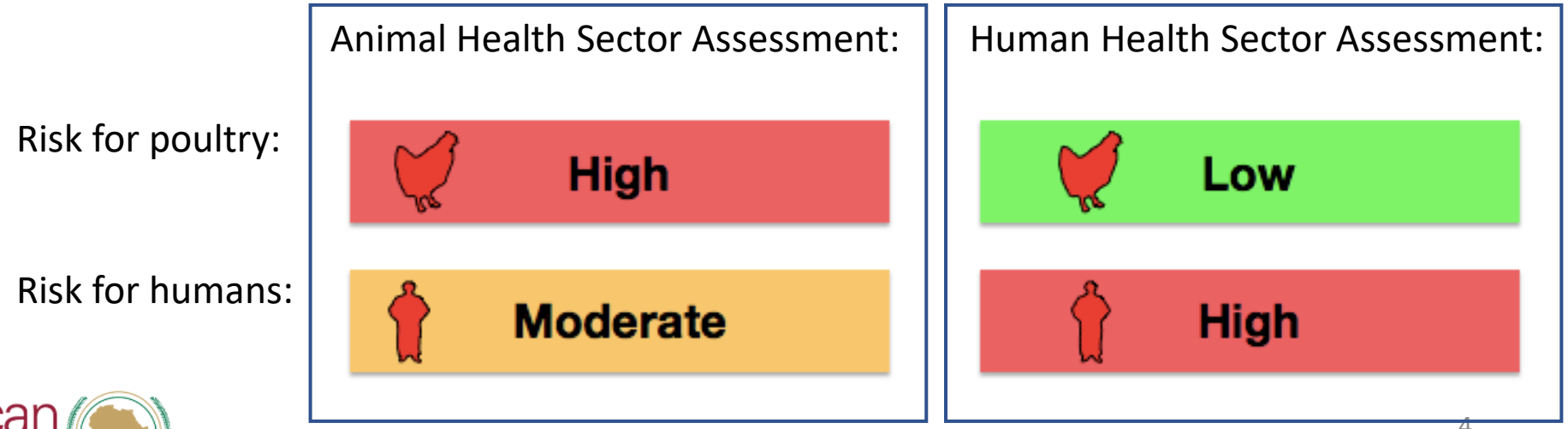
1. Key Principles for Joint Risk Assessment

Why do we need Joint Risk Assessment?

The reality: Technical staff from different sectors, assessing the same hazard, will generally estimate risk differently.

Example Risk Assessment Question:

What is the likelihood of a zoonotic influenza infecting a person and infecting an animal?



1. Key Principles for Joint Risk Assessment

Why do we need Joint Risk Assessment?

Zoonotic diseases require a joint, One Health approach to risk assessment

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1. Key Principles for Joint Risk Assessment

Why do we need Joint Risk Assessment?

All relevant stakeholders are required to fully understand the risks posed by hazards at the interface

When all relevant sectors are at the table they can:

- Collectively evaluate where and why risk exists
  - ✓ through **expertise** and **data** gathered from each sector

- Minimise unintended impacts
  - ✓ by understanding and addressing the **perspectives** and **needs** from each sector

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2. Introducing the Joint Risk Assessment Operational Tool (JRA OT)

Builds from existing tools and resources available across the Tripartite

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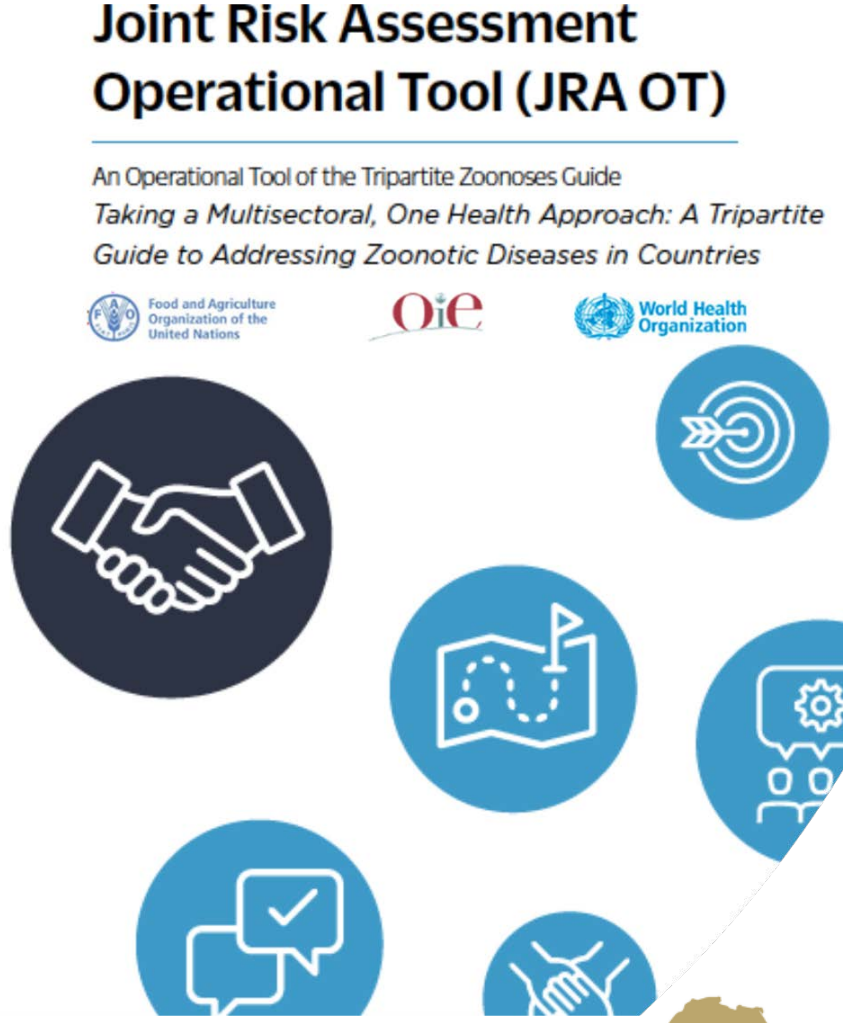
2. Introducing the Joint Risk Assessment Operational Tool (JRA OT)

- Creates a **routine structure and approach** for conducting JRAs at the national or subnational levels
- Jointly identifies **priority hazards**
- Involves **all relevant sectors** in technical risk assessment = One Health approach
- Fosters **regular communication** among sectors
- Allows decision makers to implement **evidence-based approaches** for risk management and communication
- Identifies missing information and **knowledge gaps**



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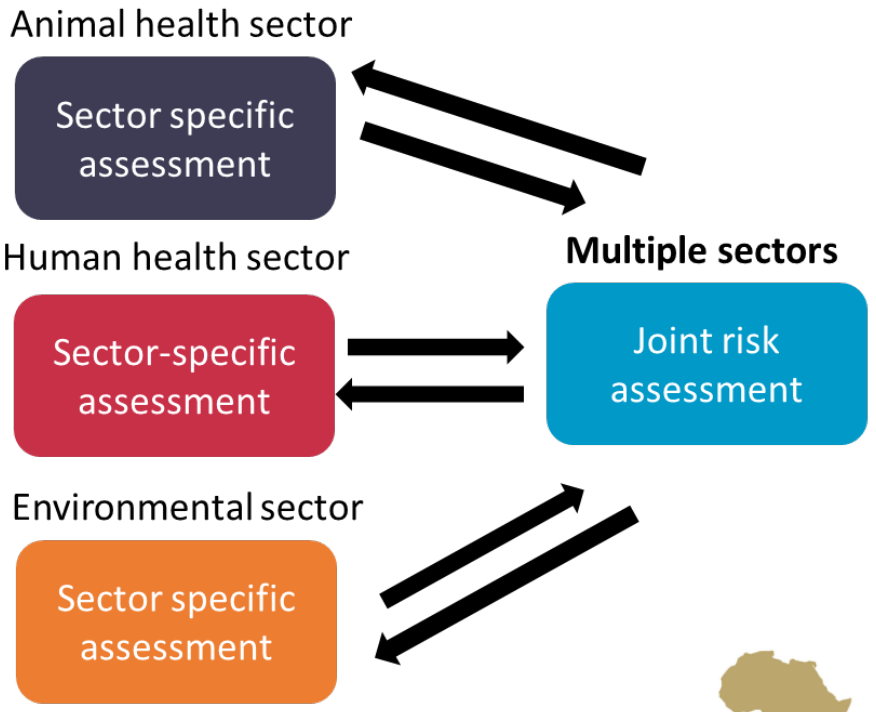
2. Introducing the Joint Risk Assessment Operational Tool (JRA OT)

JRA OT allows technical staff to conduct joint qualitative risk assessments at the national or subnational level

A 10-step method for assessing risk at the human-animal-environmental interface:

- Qualitative
- Assessment of a single hazard (health event*)
- Uses existing technical knowledge and available data
- Can be iteratively repeated and updated
- Ensures science-informed / evidence-based risk management and communication
- **Does NOT replace sector-specific risk assessments**

*priority zoonotic disease or other joint health threat



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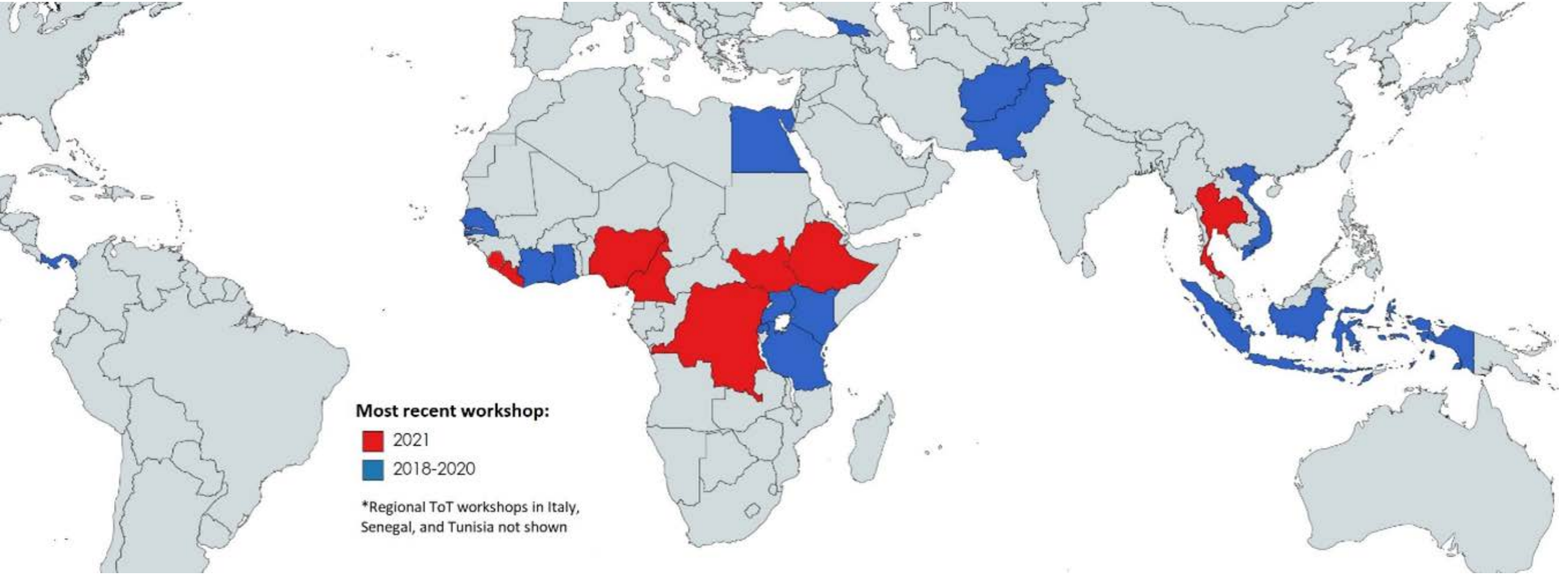
2. Introducing the Joint Risk Assessment Operational Tool (JRA OT)

JRA Country Workshops



External support received from USAID, DTRA, KOICA, USDA, CDC and PHE

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3. The 10-step JRA Method

JRA Modules and Steps

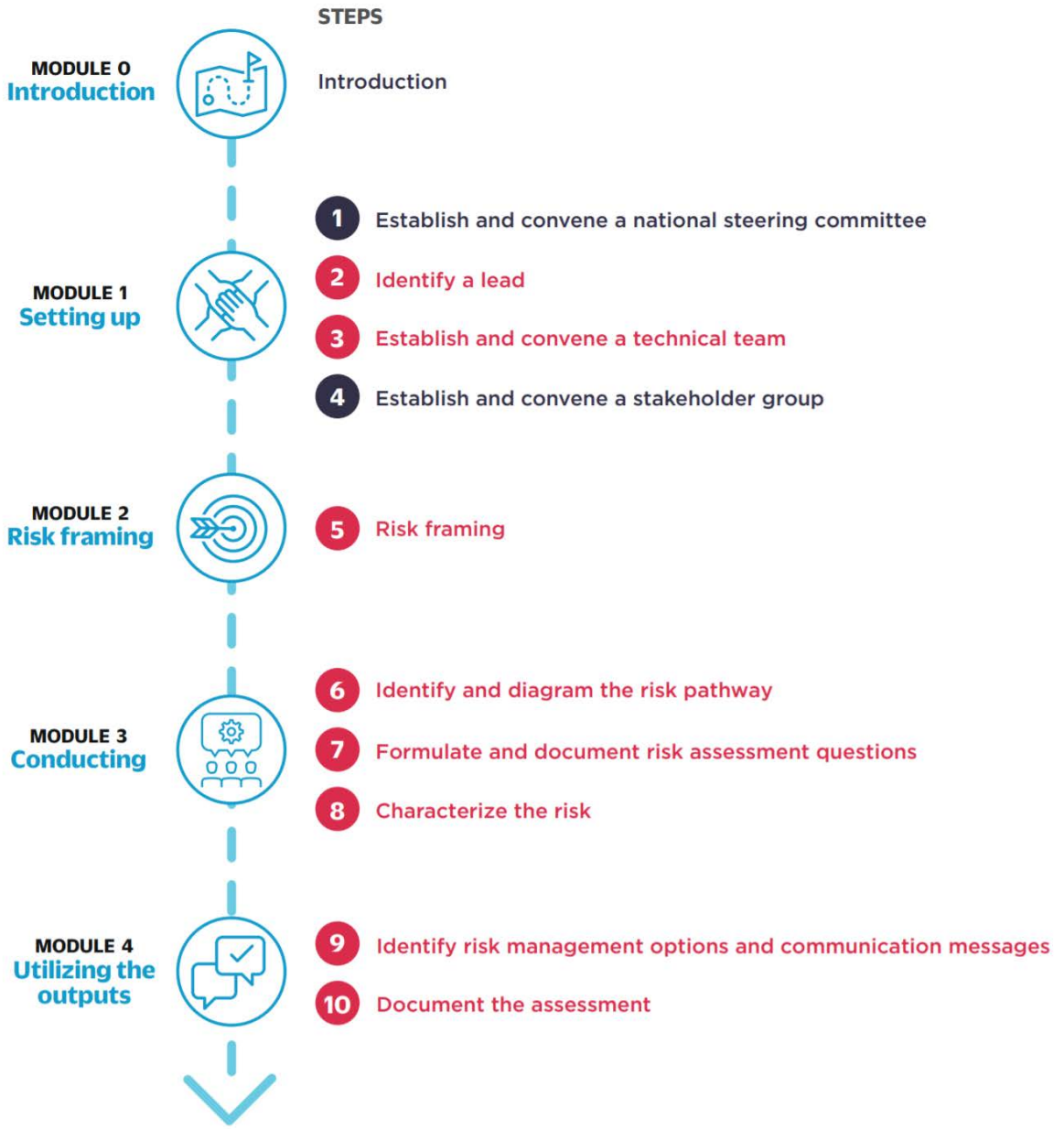
Key point

The 10 steps of the JRA OT are divided into four modules

steps that are **recommended** vs **required (i.e. even in emergencies)**

Online facilitator training is available on the OpenWHO website.
2950 learners already trained!

Figure 2: JRA modules and steps (required: ●, recommended: ●)



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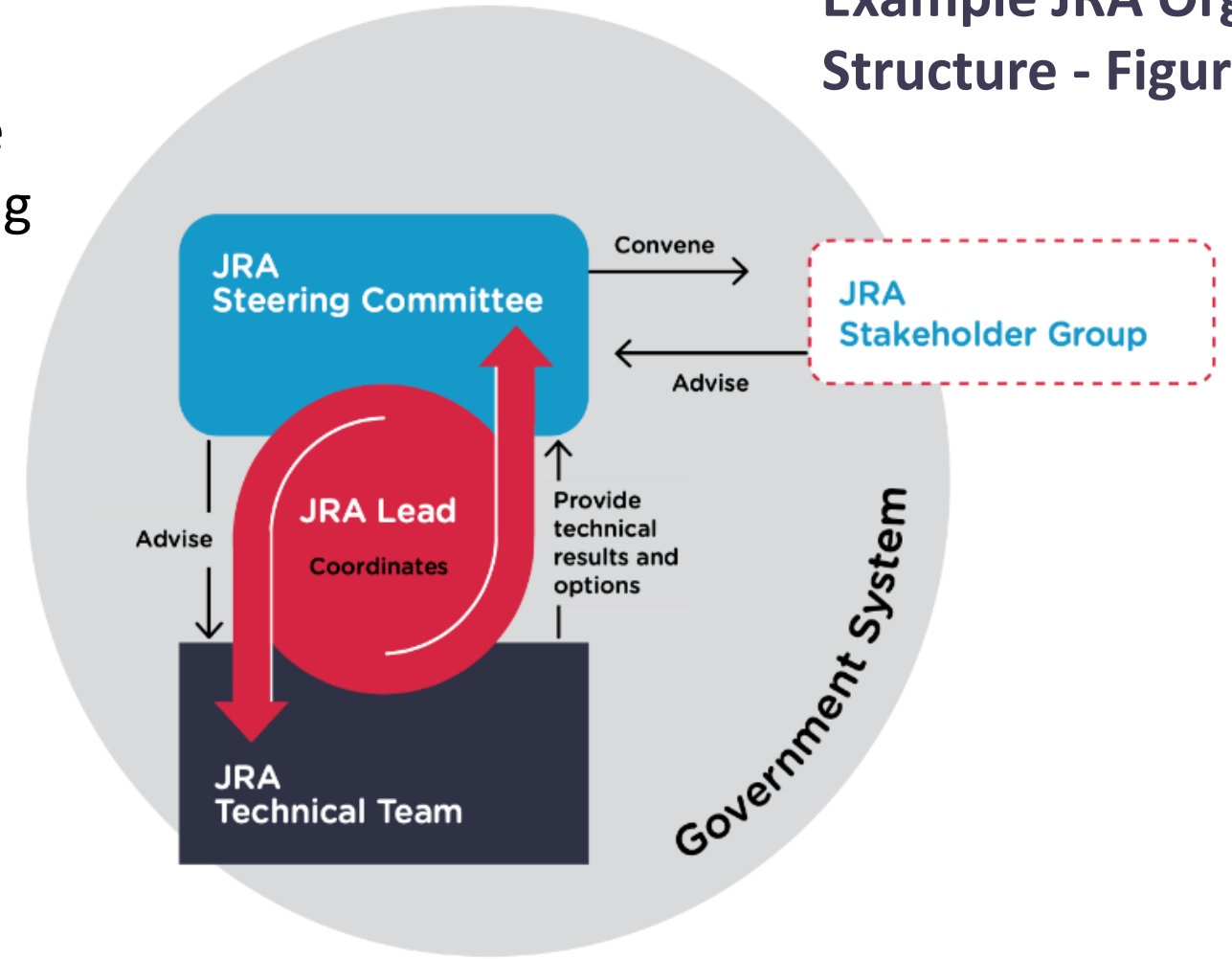
3. The 10-step JRA Method

Setting Up JRA

JRA Steering Committee should align with existing MCM structures in the country

MCM = Multisectoral Coordination Mechanism (e.g. OH Platform)

Example JRA Organizational Structure - Figure 2



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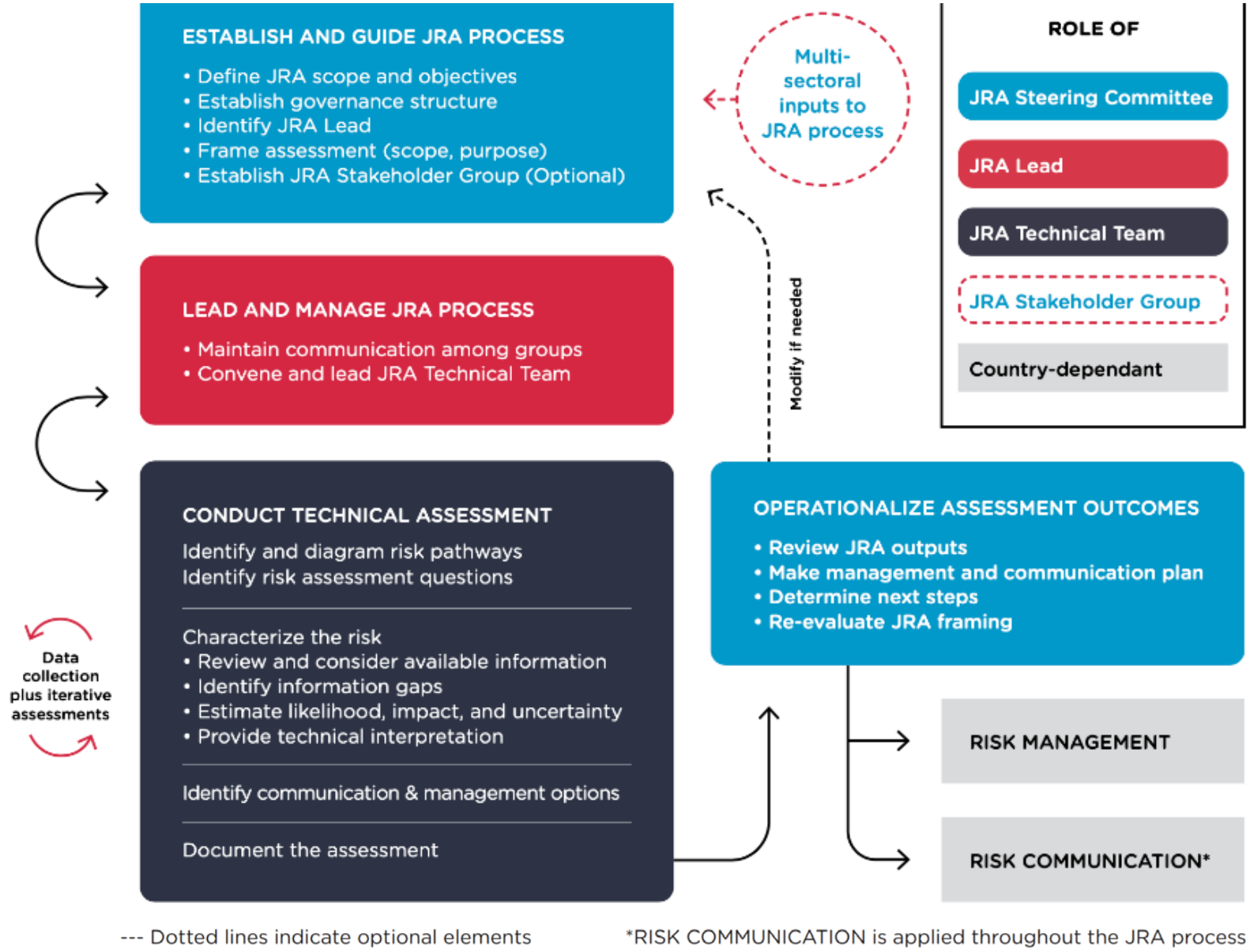
3. The 10-step JRA Method



Roles and Responsibilities

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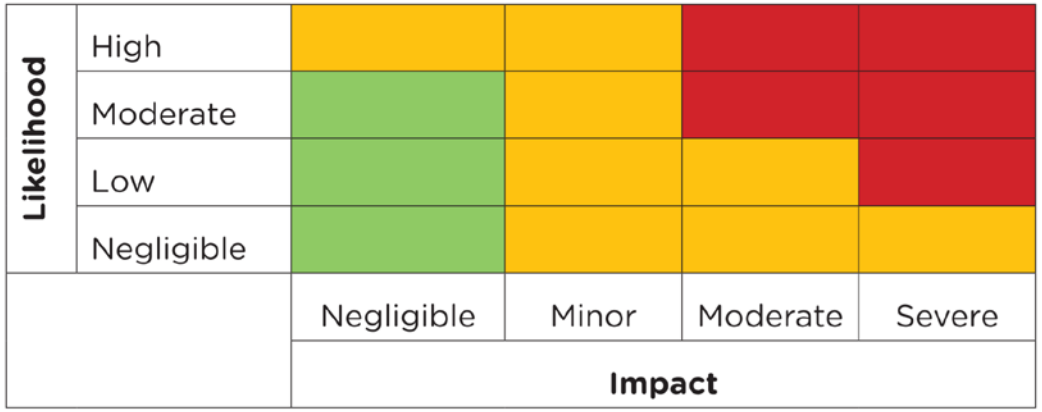
3. The 10-step JRA Method

Risk management options & communication messages

- Evidence from the risk assessment is used to propose risk management and communications options for consideration
  - ✓ Identify options
  - ✓ Describe evidence-base and technically justify
  - ✓ Prioritise options

Figure 8. A risk matrix



For example, risk assessment results (likelihood and impact of introduction of a livestock disease) could link to risk management (use of surveillance), as follows:

- **red**: critical to implement mitigation measures (increased surveillance);
- **yellow**: review and adjust mitigation measures (surveillance enhanced: targeted or linked with existing surveillance activities);
- **green**: maintain current mitigation measures (surveillance maintained).

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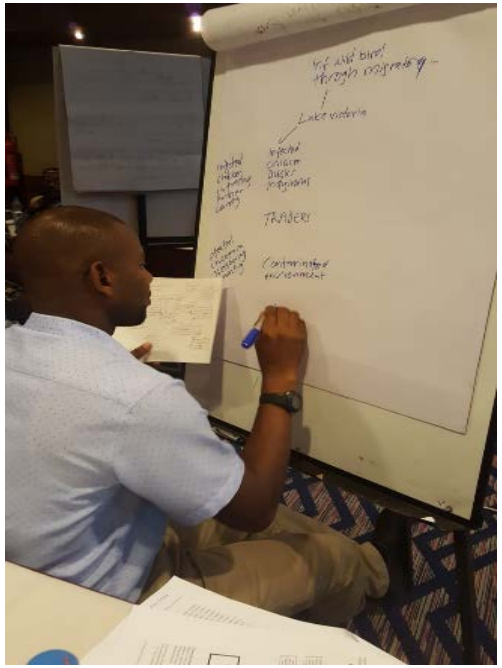
4. Operationalization

Examples of hazards assessed during JRA workshops

- Zoonotic influenza (various subtypes)
- Leptospirosis
- Anti-Microbial Resistance (AMR)
- Crimean-Congo Hemorrhagic Fever (CCHF)
- SARS-CoV-2
- Monkeypox
- Lassa fever
- Anthrax
- Ebola

PZDs!



Examples of integration of the JRA results into country planning

Tanzania

- JRA was added to the existing Rabies preparedness and response planning.
- JRA communication options led to development of Rabies awareness material.

Ethiopia

- JRA was added to the existing RVF preparedness and response planning.
- JRA results motivated government authorities to strengthen disease surveillance and perform an import risk analysis on the disease.

Senegal

- JRA was added to the existing HPAI preparedness and response planning.
- JRA outputs were utilized during recent HPAI outbreaks in the country to support OH interventions.

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4. Operationalization

July 2021 JRA Operationalization Workshop for Africa: Lessons Learnt and Way Forward

Countries: Ethiopia, Kenya, Cameroun, Tanzania, Senegal, Nigeria and Liberia

- Asked to present their JRA roll-out details including the benefits, challenges, and recommendations

Some of the challenges identified:

- Difficult to make quick changes to quick changes to national surveillance and control plans post-JRA
- Rolling out at the subnational level (training needed, MCM often not established)
- Not many individuals in each sector trained in JRA (yet)
- Lots of material to cover in a workshop
- Sharing lessons and results across borders
- Funding transition (form donors to country level)

MCM = Multisectoral Coordination Mechanism (e.g. OH Platform)

Many benefits also! MCM trained and functionality assessed during workshops: **putting OH into action**

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4. Operationalization

July 2021 JRA Operationalization Workshop for Africa: Lessons Learnt and Way Forward

Some of the recommendations:

- **JRA Lead is key** - JRA planning (e.g. risk framing), facilitation and follow-up activities must be part of their job description
- **Budgeting** (financial and time) for workshops is minimal, but should not be overlooked
- Funding and human resource limitations of specific sectors (affecting **sector engagement**) must be considered for
  - Participation in JRA workshops
  - Implementation of risk management options
- Address **identified knowledge gaps** holistically (e.g. consider capacity building of experts and data collection) before each iteration
- Do not limit assessments or trainings to national levels, ownership can be shared **sub-nationally**
- **Simulation exercises** can be utilized to test risk management and communication options after workshops

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4. Operationalization

Enhancing the JRA

The JRA functions optimally when all are available:

For more information:

Next step: JRA impact assessment (work in progress)

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THANK YOU

Sophie von Dobschuetz

Sophie.Vondobschuetz@fao.org

On behalf of:

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